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LIFE SATISFACTION, IMPULSIVITY, MINORITY STRESS AND RESILIENCE AMONG THIRD GENDER COMMUNITIES: A CORRELATIONAL STUDY

Dissertation submitted for the Partial Fulfilment of Requirements for Degree of

MASTERS OF SCIENCE IN APPLIED PSYCHOLOGY

(Specialization in Rehabilitation Psychology)

Work under supervision of

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CERTIFICATE

This is to certify that the dissertation entitled to

"Life Satisfaction, Impulsivity, Minority Stress and Resilience Among Third Gender Communities: A correlational study"

Submitted by Ms. Saheli Das for partial fulfilment of the MSc. Dissertation in Applied Psychology (specialization in Rehabilitation Psychology), Sister Nivedita University, is a Bonafede work and may be placed before the Board of Examiners, for their consideration.

This is an original study done by the candidate and has been submitted by her before any form for any other degree of this University and any other University.

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PLAGIARISM CERTIFICATE

"I, SAHELI DAS, hereby declare that the research work titled, "Life Satisfaction, Impulsivity, Minority Stress and Resilience Among Third Gender Communities: A correlational study", conducted by me, has been completed with full honesty and integrity. I confirm that the work is original, and all sources of information have been appropriately acknowledged and cited. Furthermore, I affirm that the research work has under gone thorough plagiarism checks to ensure its authenticity. I take full responsibility for the context and findings presented in the research."

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Date:

Signature:

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ABSTRACT

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"Life Satisfaction, Impulsivity, Minority Stress and Resilience Among Third Gender Communities: A correlational study"

ABSTRACT

The study explores the experiences of third gender individuals, focusing on the interplay between life satisfaction, impulsivity, minority stress (gender discrimination, gender rejection, gender victimization, non-affirmation, and internalized transphobia), and resilience factors (pride and community connectedness). It aims to address the gap in research concerning the well-being of this marginalized group, who face unique challenges.

Aim: The study aims to explore the experiences of third gender individuals, focusing on the interplay between life satisfaction, impulsivity, minority stress (gender discrimination, gender rejection, gender victimization, non-affirmation, and internalized transphobia), and resilience factors (pride and community connectedness).

Research Design: A correlational research design was employed to examine the relationships between the variables of interest.

Findings: The findings highlight the negative impact of social stressors and the potential role of impulsivity, while also emphasizing the importance of protective factors like pride and community connectedness in this population.

Result: The data reveals a statistically significant, moderately positive correlation between community connectedness and motor impulsivity within the studied third gender community. This suggests that fostering stronger community bonds may coincide with the presence of motor impulsivity within the community.

Conclusion: The results suggest a need for interventions and social changes that address stigma, promote support, and foster resilience in this population.

KEYWORDS: Life Satisfaction, Impulsivity, Minority Stress, Resilience, Third Gender Community

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CHAPTER ONE

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INTRODUCTION

The world, a stage of painted smiles,
Where roles are set, and lines are styled.
I wear a skin of frosted glass,
Through which their judging glances pass.

A whisper trails, a pointed stare,
A silent question, hanging there.
"Are you a he? Or are you she?"
A puzzle they can't solve in me.

The ancient rhythms, in my soul,
A story that they can't control.
They seek a label, neat and clean,
But I'm the space that lies between.

The laughter stings, a sharpened dart,
That tears the fragile, hidden heart.
A silent scream, a muffled plea,
"Just see the human, that is me."

The shadows lengthen, cold and deep,
Where secrets that the lost ones keep,
Are whispered low, a mournful sound,
In this forgotten, hallowed ground.

Yet, in the darkness, stars ignite,
A flickering, defiant light.
For in this "othered" space I find,
A strength of spirit, intertwined.

And though they build their walls so high,
My truth will pierce the judging sky.
For I am more than they can see,
A boundless, untamed entity.

-Rijad Islamovic

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GENDER AND SOCIETY IN INDIA

India, a land of ancient wisdom and kaleidoscopic diversity, presents a rich and nuanced tapestry of gender identities, far exceeding the binary constructs prevalent in many Western societies. The concept of gender here is not a rigid structure, but a fluid spectrum, interwoven with spirituality, tradition, and the ever-evolving currents of modernity.

From the bustling metropolis of Mumbai to the serene backwaters of Kerala, the traditional understanding of gender often acknowledges a third, or even multiple, genders. The Hijra community, with their long history and cultural significance, stands as a testament to this fluidity. Their presence, though often marginalized, is a constant reminder of the limitations of a binary view. Their vibrant saris, their melodic chants, and their unique social structure paint a vivid picture of a gender identity that transcends conventional norms.

Beyond the Third gender, other regional variations exist. In some areas, individuals who identify as neither male nor female occupy distinct social roles, often tied to religious or spiritual practices. The Ardhanarishvara, a composite form of Shiva and Parvati, embodies this fluidity, symbolizing the inseparable union of masculine and feminine energies. This ancient deity serves as a powerful reminder of the inherent interconnectedness of genders within the Hindu pantheon.

However, the weight of colonial influence and the rise of a more homogenized, often Western-influenced, understanding of gender has created complex tensions. The legal recognition of a third gender, while a landmark achievement, is only one step in a long journey towards true social acceptance. The lived realities of many transgender and non-binary individuals remain fraught with discrimination, prejudice, and limited opportunities.

In urban centres, the burgeoning LGBTQ+ movement is challenging traditional norms, creating spaces for open dialogue and visibility. Pride parades, once rare, are now vibrant expressions of defiance and celebration. The internet and social media have provided platforms for individuals to connect, share their stories, and build communities. Yet, the fight for equality continues, as legal battles and social campaigns strive to dismantle deeply ingrained prejudices.

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Rural India, with its strong ties to tradition, often presents a different landscape. Here, the understanding of gender may be more rooted in ancient customs and spiritual beliefs. The concept of "prakriti" and "purusha," representing feminine and masculine energies, respectively, informs many aspects of life. However, these concepts are not always rigidly defined, and variations exist across different communities.

The women of India, a diverse group themselves, navigate a complex terrain of tradition and modernity. From the rural farmer working in the fields to the urban professional breaking glass ceilings, their experiences are varied and multifaceted. The fight for women's rights, for education, economic empowerment, and freedom from violence, is an ongoing struggle.

India's gender landscape is a dynamic and evolving space, a complex interplay of ancient wisdom and contemporary challenges. It is a land where the fluidity of gender is both celebrated and contested, where tradition and modernity clash and coalesce. The journey towards a more inclusive and equitable understanding of gender is ongoing, a testament to the nation's enduring spirit of diversity.

Anthropology endeavours scientific study of human society of the past and present in its totality, essentially the human nature. Sexuality and gender relationships constitute the most important aspect of human beings, and societies deal with this in different ways. Though biological roots cannot be denied, sexual desires and responses are shaped by the society as to the type of dress to be worn, patterns of speech, food to be taken, to marry, the control of births, work to be undertaken, responsibilities fixed, studies to be undertaken, employment taken up, etc. Since historical times eunuchs are known: Bakla in Philippines, Hijra India, Mahu in Hawaii, dine among the native Americans and so on, who are placed between male and female. Albanian society recognises sworn virgins, women who do not marry but put on men's dress and act as men. While USA recognises four genders, India recognises three genders only.

Thus, cultures have constructed their own gender ideologies. Employing ethnographic approach and comparative method in studying gender in various societies/cultures across the globe through fieldwork and empirical knowledge anthropology has developed an objective understanding of sexuality and gender in human societies. This course bears upon gender and society in India from this disciplinary perspective.

While sex is biological, gender is a social construction through roles played as culturally determined which are often times taken naturally according to biological sex. But we notice

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these roles differ from society to society and the role per gender is not fixed as noticed in same-sex marriages taking place around the world and trans-sexuality also. Gender is an identity that one identifies with as regards to sexual preference. Views and perspectives are changing about the sex and gender over the years, and sexual binary or dualism is no longer valid. India has recognised the third gender in 2014, and one can choose the gender for any official records (the hijra, transgender, eunuchs) and also reserved three reservations in education, employment, distributions of house sites, etc. Realising the gender inequality socioeconomic conditions India also has taken up several initiatives for bridging the gap between the male and female.

GENDER IDEOLOGY

The roots of gender ideology in Indian society, as Susan Wadley, Vandana Shiva and others state can be located in the Samkhya philosophical tradition where both the genders are equally important. This philosophy explains causation, existence, creation and evolution of world with the concepts of Purusa and Prakruti that represent the male and female principles. These are also sources of knowledge. In this dualistic realist philosophy purusa and Prakruti are opposite in nature. The world is created and recreated through the dialectical play of creation and destruction and also cohesion and disintegration; these opposite forces create tension by which dynamic cosmic energy emerges which is known as Shakti. This primordial energy manifests in all pervasive nature (Prakruti). Thus, nature that consists of both animate and inanimate beings and things is the expression of Shakti, the feminine creative principle that works in relationship with masculine principle (purusa). All the forms of nature are the children of the Mother Nature. Prakruti is also called Lalitha, player – free and spontaneous creative activity. The gender equality is well represented in Ardhanarishwara (Lord who is half-woman), a complete androgynous form of male and female representing deities Shiv (God) and Parvati (goddess); a synthesis of male and female principles.

The feminine principle is also found in the symbolic expression of female deities or goddesses as consorts of gods who represent the masculine principles. The popularly known goddesses Saraswati, Lakshmi and Parvati represent their counter parts– the trinity – Brahma, Vishnu and Maheswara or Iswara, the gods who control the affairs of human world, and the former are embodiment of wisdom, wealth, virtues, chastity, devotion and benevolence. Sita wife of Lord Sri Ram is reincarnation of goddess Lakshmi, the deity of wealth, who also represents chastity

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and devotion to husband. These are role models for Hindu women besides being symbols of virtuous woman. Further, goddesses like Satyabhama or Kali or Durga or Sheetala Mata symbolise valour and bravery of woman. However, unmarried village goddesses who accept animal sacrifices are identified with Kali or Durga or Parvati who in turn represent the primeval energy Shakti or Adi Shakti, creative feminine principle as mentioned before. But these village goddesses who receive sacrifices are considered inferior to other goddesses and God who are worshipped only with vegetarian offerings. Anthropologists draw parallels between the divine hierarchy and societal ranking.

Third gender also finds place in this ideology. One refers in this regard to the divine beings such as Aravan, Harihara, Bahu Chara Mata, Gadadhara, etc., who do not fit strictly into the gender binary. Not only in ideology but in practice also Hindu society has not been averse to unions of same gender and transgender behaviour. It is argued that women in Vedic age enjoyed equal status as that of men. But the post-Vedic age their position has been derogated. Some also point out to low esteem accorded to women in the past referring to Draupadi in Mahabharata and others in Puranic period and Devadasi system and its several diminutive forms practiced for ages.

THIRD GENDER IN INDIA

The term "third gender" or "Hijra" in India refers to a community of individuals who identify as neither male nor female. Their history is deeply rooted in Indian culture, with references found in ancient texts. The concept of a third gender has deep historical roots in India, with mentions in ancient Hindu scriptures like the Mahabharata and Ramayana. However, despite this historical presence, they face significant social stigma and marginalization.

Hijras often live in tightly knit communities, with a distinct social structure and traditions. Many engage in traditional roles, such as performing at ceremonies like weddings and births. Some Hijras undergo a ritualistic initiation, which can involve the removal of male genitalia.

Socially, Hijras are frequently ostracized. They face discrimination in employment, housing, and access to healthcare. This marginalization often leads to poverty and forces some into begging or sex work. While the Supreme Court of India recognized transgender individuals

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as a "third gender" in 2014, granting them legal rights, the implementation of these rights remains a challenge.

Despite legal recognition, societal attitudes are slow to change. Hijras continue to struggle for basic human rights and dignity. Activists and organizations are working to raise awareness and promote inclusion, but significant progress is still needed to ensure that Hijras are treated with respect and granted equal opportunities within Indian society.

CULTURAL VIEW OF THIRD GENDER COMMUNITY IN INDIA

The humid air hangs thick with the scent of marigolds and sandalwood as the procession winds its way through the narrow, bustling lanes. A riot of colour, the Hijras move with a captivating grace, their saris shimmering like liquid gold under the afternoon sun. Their laughter, a melodic chime, cuts through the cacophony of the marketplace, a sound both joyous and defiant.

This is the heart of Hijra culture in India, a vibrant tapestry woven from ancient traditions, social marginalization, and an unwavering sense of community. The procession, a celebration of life, fertility, or perhaps a simple blessing, is a testament to their unique role in the social fabric of the nation.

Their faces, painted with elaborate designs, tell stories of hardship and resilience. Eyes, rimmed with kohl, hold a depth of wisdom, a silent understanding of the complexities of gender and identity. Their hands, adorned with bangles that jingle with every movement, offer blessings and bestow good fortune. The rhythmic beat of the dhol echoes through the streets, a hypnotic pulse that draws onlookers into their world.

Within the community, a strong sense of kinship thrives. The guru-chela system, a lineage of mentorship, provides a haven, a family for those often rejected by their biological ones. It's a world governed by its own rules, its own rituals, a sanctuary where individuals can embrace their true selves without fear of judgment. The collective singing and dancing are not merely performances; they are expressions of solidarity, a celebration of their shared identity.

Yet, behind the vibrant facade lies a stark reality. The social stigma that clings to the Hijra community casts a long shadow, forcing many into the margins of society. Begging, sex work, and limited employment opportunities become harsh necessities for survival. The vibrant

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colours of their attire often conceal the scars of discrimination, the silent struggles against prejudice.

The ancient blessings they bestow, once revered, are now often met with a mixture of awe and fear. Their presence, though deeply rooted in tradition, is sometimes viewed as an anomaly, a deviation from the accepted norms. This duality, this constant negotiation between acceptance and rejection, defines their existence.

As the procession fades into the distance, the echoes of their laughter linger in the air. It's a reminder of their enduring spirit, their unwavering determination to carve out a space for themselves in a society that often seeks to erase them. The Hijra community, a testament to the fluidity of gender and the power of community, continues to dance to its own rhythm, a vibrant thread in the rich and complex tapestry of India. They are a reminder that even in the face of adversity, beauty, resilience, and a profound sense of belonging can flourish.

LIFE SATISFACTION AMONG THIRD GENDER INDIVIDUAL

Life satisfaction is a broad concept that essentially refers to how people evaluate their own lives. Life satisfaction is a cognitive assessment of a person's overall feelings and attitudes about their life. It's not just about momentary happiness, but a more long-term evaluation. Life satisfaction is a key component of subjective well-being, which also includes positive and negative emotions.

It's influenced by various factors, including: Relationships, Work, Health, Financial stability, Personal achievements, social connections, personal values and cultural background.

Understanding life satisfaction within the third gender community in India requires considering the unique challenges they face:

- **Increased Vulnerability:** Third-gender individuals often experience significant discrimination, social stigma, and marginalization. This can severely impact their life satisfaction. Factors like exclusion from education, employment, and healthcare contribute to lower levels of well-being.

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- **Social Acceptance:** Social acceptance and inclusion are crucial for life satisfaction. When third-gender individuals feel accepted and respected, their overall well-being improves.
- **Legal Recognition vs. Social Reality:** While legal recognition of the third gender in India is a positive step, the gap between legal rights and social reality remains a challenge. Continued discrimination and lack of opportunities can undermine life satisfaction.
- **Community Support:** For many third-gender individuals, particularly hijras, community support plays a vital role in their well-being. Strong community bonds can provide a sense of belonging and support, which can enhance life satisfaction.
- **Factors influencing life satisfaction within this community include:**
    - levels of discrimination experienced.
    - access to healthcare.
    - access to education and employment.
    - levels of familial and societal acceptance.
    - The strength of community support networks.

In essence, life satisfaction for third-gender individuals in India is significantly influenced by the degree to which they experience social inclusion, acceptance, and access to basic rights and opportunities.

STRESS AMONG THIRD GENDER COMMUNITY

Minority stress refers to the chronic stress experienced by members of stigmatized social groups. This stress stems from their minority status and the resulting exposure to prejudice, discrimination, and social rejection.

It's not simply the stress of being different, but the stress of living in a society that devalues and marginalizes that difference. Third-gender individuals and hijras in India face numerous stressors that contribute to minority stress, including:

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- **Discrimination and Stigma:** They often experience pervasive discrimination in various aspects of life, including education, employment, housing, and healthcare. Social stigma leads to feelings of isolation, shame, and low self-esteem.
- **Prejudice and Violence:** They are vulnerable to verbal abuse, harassment, and physical violence. Prejudice can manifest in everyday interactions, creating a hostile environment.
- **Social Exclusion:** They may be rejected by their families and communities, leading to social isolation. Exclusion from mainstream social institutions limits their opportunities and resources.
- **Internalized Stigma:** They may internalize negative societal attitudes, leading to self-hatred and negative self-perception.
- **Lack of Legal and Social Protections:** While legal recognition has occurred, the application of those laws is not always consistent. This lack of consistent protection adds to the stress of daily life.
- **Economic Hardship:** Due to discrimination, many third-gender individuals and hijras face economic hardship, often resorting to marginalized forms of income generation. This adds to the stress they experience.

In essence, minority stress creates a heavy burden for third-gender individuals and hijras, affecting their overall well-being.

RESILIENCE AMONG THIRD GENDER COMMUNITY

Resilience is the ability to adapt well in the face of adversity, trauma, tragedy, threats, or significant sources of stress. It involves "bouncing back" from difficult experiences.

Here's a breakdown-

- **Adaptability:** Resilience is about being able to adjust to difficult circumstances.
- **Coping Mechanisms:** It involves utilizing coping strategies to navigate stress and adversity.

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- **Strength and Recovery:** It's the capacity to recover from setbacks and continue moving forward.

When considering resilience within the third gender or Hijra community in India, it's essential to recognize the profound challenges they often encounter.

- **Overcoming Stigma and Discrimination:** Third-gender individuals and Hijras often demonstrate remarkable resilience in the face of persistent social stigma, discrimination, and prejudice.
- **Building Community Support:** Strong community bonds within the Hijra community provide crucial support and contribute to resilience. These communities can provide emotional, social, and sometimes economic support.
- **Navigating Marginalization:** They often develop unique coping mechanisms to navigate social exclusion, economic hardship, and limited access to resources.
- **Finding Strength in Identity:** For many, their gender identity becomes a source of strength and resilience, despite societal pressures.
- **Factors affecting resilience:**
  - Access to education and employment.
  - Levels of family and community acceptance.
  - Access to legal protections and healthcare.
  - The strength of social support networks.

In essence, resilience in the third gender/Hijra context reflects the strength and adaptability required to survive and thrive in a society that often presents significant obstacles.

IMPULSIVITY AMONG THIRD GENDER INDIVIDUAL

Impulsivity is a personality trait characterized by acting without thinking or planning. It involves a tendency to make hasty decisions, engage in risky behaviours, and have difficulty controlling urges. Here's a breakdown:

- **Lack of Planning:** Impulsive individuals often act on immediate desires without considering the consequences.

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- **Difficulty with Self-Control:** They may struggle to resist temptations or delay gratification.
- **Risky Behaviours:** Impulsivity can lead to engaging in behaviours that have negative outcomes.
- **Emotional Reactivity:** Impulsive actions can be triggered by strong emotions.

Understanding impulsivity within the third gender or Hijra community requires acknowledging the complex social and psychological factors they face:

- **Stress and Marginalization:** The chronic stress of minority status, discrimination, and social exclusion can contribute to increased impulsivity. Living in precarious circumstances may lead to more immediate, risk-taking behaviours as a means of survival.
- **Coping Mechanisms:** For some, impulsive behaviours may serve as a coping mechanism for dealing with emotional pain and trauma. Substance use, or other activities that provide an immediate release, could be a result of this.
- **Economic Vulnerability:** Economic hardship can force individuals into risky situations, such as survival sex work, which may appear to be impulsive acts, but are in actuality acts of survival.
- **Mental Health and Social factors:** Mental health conditions, which can be exacerbated by minority stress, can also contribute to impulsivity. A lack of access to stable support networks can also increase the likelihood of impulsive actions.

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CHAPTER TWO

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A REVIEW OF LITERATURE

Though transgender people face discrimination and violence in society because of their gender identity, still many of them successfully hold positivity and find a good life in society. Many studies have shown that transgender people have strong resilience that make them to adopt a positivity about life, about themselves in society despite of all disparities. **Arnold H. Grossman, 2011** has shown in his study that almost 55 transgender youth described their gender development and stressful life experiences was described by some related to their gender expression and identity of gender. Past verbal abuse by peer group, family members related to gender identity and nonconformity by almost two thirds of transgender youth and past physical abuse reported by one-third to one-fifth transgender youth. In his study he examined four aspects of psychological resilience: self-esteem, perceived social support, emotion-oriented coping and a sense of self mastery.

Research on the Cultural, Psychiatric, and Sexuality Aspects of Hijras in India by **Kalra** and **Shah** in the year **2014**, aims to understand the cultural, psychiatric, and sexuality aspects of hijras in the city of Mumbai, focusing on the prevalence of gender identity disorder and psychiatric disorders (if any) in them, their self-esteem, and their sexual practices.

Research on mental health among transgender stated that the prevalence of psychiatric disorders among transgender people have identified elevated rates of psychopathology. The research identifies 38 cross-sectional and longitudinal studies describing that the levels of psychopathology and psychiatric disorders in transgender people attending attendance services are higher than in the cis population. Depression and anxiety are found on the main axis1. Schizophrenia and bipolar disorder are rare in other psychiatric disorder. Evidence regarding gender differences conflict: studies found higher psychopathology in transgender women, while other studies found there is no differences between gender groups. Overall, this research paper shows that transgender people attending transgender health care services apparently have higher risk of psychiatric comorbidity, and therefore confirms that this population is vulnerable to the mental health issues, **(Dhejne C, 2016).**

One study by **Tamar C. Carmel** and **Laura Erickson-Schroth** in **2016** has shown that disproportionate rates of discrimination, harassment, sexual assault and violence experienced by transgender people and gender non conformity group have negative mental health outcome,

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was explained by Minority Stress Model. Additionally, research demonstrated an increased risk of substance abuse, self-injury, depression, and suicidal attempts in transgender people. Account to posttraumatic stress disorder, anxiety disorder, bipolar disorder, psychotic disorder, eating disorder, body dysmorphic disorder, and autism spectrum disorder are less conclusively in studies.

Researchers have examined discrimination and resilience among transgender and potential responses of health services. Out of 1478 papers 19 papers were reviewed through following the rigorous inclusion and exclusion criteria. Findings yielded that there is a need to ensure transgender's needs should be represented and fully integrated because there are clear outcomes that improve their quality of life and health. Though discrimination make them experience poorer health, still many transgender people are capable of developing positive coping strategies and resilience **(E. McCann & M. Brown, 2016).**

There has been a big increment in research examining the health disparities among sexual and gender minorities. **Sara B. Oswalt** and **Alyssa M. Lederer** in the year **2017**, have found in their research work that transgender students have approximately twice the risk for most mental health conditions compared to the female students who are cisgender. Schizophrenia is a notable exception, where transgender students have seven times the risk when compared to cisgender. Regression analyses and significant findings have shown that being a non-heterosexual is a big predictor for concern of mental health.

One research has been done in Indian perspective where researcher has demonstrated resilience among transgender. Transgender people are exploited, ridiculed, and discriminated in society; they are rejected by their families and communities because of their gender role and gender expression. Mental health problems and psychological distress are common among this population. Through consecutive sampling method sixty transgender people were recruited by researcher for this study. For the purpose of study **Connor Davidson** Resilience Scale was used. Researcher found that respondents scored low in the resilience scale, and this score was lower across the world in comparison to the other population. This score showed the poor resilience status among the respondents. On other hand, it was found that residing at family, having education and being employed, are the factors which are helpful in better resilience among transgender population **(Mr. Virupaksa, 2018)**.

The study was done on Resilience Among Transgender Persons Indian Perspective by **Virupaksha, Hasiruvalli Gangappa, Muralidhar & Daliboyna** on **June 2018.** It was found

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that the resilience among transgender persons need to be researched and explored further and need to be strengthened by identifying and enhancing the factors associated with better resilience level. Further, family acceptance, societal acceptance, mainstreaming to the education and employment sectors, and provision of health care and social services would bring changes in their lives.

A study focusing on the impact of discrimination on the quality of life of transgender individuals by **P. Naskar, S. Roy, S. Naskar and I. Gupta** in the year **2018**, recognizing the higher levels of discrimination they often face. The research involved 79 transgender adults from the Burdwan district in West Bengal, chosen through simple random sampling. The World Health Organization - Quality of Life BREF instrument was used for data collection. The findings indicated that 57 percent of the subjects had a better quality of life. Factors such as income, education, marital status, and living arrangements showed a significant and positive association with the quality of life. However, older adolescents reported a lower quality of life compared to their younger counterparts.

A study was conducted by **Puckett, Emmie Matsuno, Christina Dyar, Brian , Michael E Newcomb** in the year **July 2019** on Mental Health and Resilience in Transgender Individuals: What Type of Support Makes a Difference, where the research has generally shown the benefits of social support, such as the buffering effects on life stressors, yet there has been little empirical investigation of different types of support resources for transgender individuals. The research examined family support, support from friends, and connectedness to a transgender community and how these forms of support come together to influence mental health and resilience. Over half of participants reported moderate to severe levels of anxious and depressive symptoms. Family social support had the strongest correlations with symptoms of anxiety and depression and was the only form of support associated with resilience when controlling for other forms of support. This study highlights the importance of examining support from a more holistic approach and provides insight into unique associations between familial social support and resilience.

Another study was conducted by **Pathak, Dr. Sharma and Dr. Olain** in the year **March 2020** on Mental health and resilience among transgender, where result has been found that transgender face mental health issues due to discrimination against them at places. Since they come under minority group and facing a lot of issues in their lives that make them to be at risk

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twice than the other gender groups. It was found less resilience among transgender which led them to mental health issues.

Another study on Looking-glass-self: Tale of happiness, self-esteem, and satisfaction with life among transgender from Kinner community by **Tiwari, Narula & Mathur** in the year **2020**. The outcome of the study depicts that there is a presence of significant relationships between the mentioned variables, which show that the respondents are strongly maintaining their self-concept but that does not mean anyway that they are also happy and enjoying the social treatment given to them.

A study was conducted by **Bhattacharya and Ghosh** in the year **November 2020** on Studying physical and mental health status among hijra, Kothi and transgender community in Kolkata, India. The study results clearly indicate that there is a pressing need to address both physical and mental health among gender-diverse communities by not only improving awareness of their healthcare rights but by also removing social and structural barriers to health programs, increasing targeted health interventions, grassroot level activism, and government advocacy.

In the year **2020** by **Majumder, Raychaudhuri, Chakraborty and Bhattacharjee**, an Observational Study of the Quality of Life Among Gender Incongruent Individuals From "Hijra" Community of India. No difference was observed between two groups with regards to other QOL domains namely general health perception, physical functioning, role limitation due to physical problem, bodily pain, general mental health, social functioning, and vitality. QOL of the gender incongruent individuals from the hijra community included in this study and the control group comprising of hospital employees were almost similar, though the former had reported lower levels of emotional health issues than the latter.

A study was conducted by **Sartaj, Krishnan, Rao, Ambekar, Dhingra and Sharan** in the year **2021** on Mental illnesses and related vulnerabilities in the Hijra community of India. Subjects were mostly in their mid-twenties, and had joined the *Hijra* community in their mid-teens. More subjects (46%) were involved in begging than in traditional Hijra roles (38%). Sex work was reported by 28% subjects. The rates of lifetime mental illness were 38%, most commonly alcohol abuse (26%); others had anxiety or depressive disorders (8% each), somatoform disorders (6%) and bulimia nervosa ($n = 1$). Disempowerment was mostly experienced in domains of autonomy and community participation; 52% had experienced sexual or psychological violence. Discrimination was attributed to gender (100%), appearance (28%) or sexual orientation (28%). There were negative correlations between the physical

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domain of WHO-QOL and physical violence and depression scores; and between discrimination and WHO-QOL environmental, physical and psychological domains.

Another study was conducted by **Mr. Kumar V.** in the year **June 2024** on Quality of Life and Life Satisfaction Among Successful and Unsuccessful Transgender, where the findings underscore the need for targeted interventions and support systems to enhance the quality of life and life satisfaction among transgender individuals, particularly those facing societal challenges. Additionally, policymakers should consider these results when formulating inclusive policies to address the diverse needs of the transgender community.

RATIONALE OF THE STUDY

The study addresses a significant gap in research concerning the well-being of third gender individuals. This study highlights that third gender individuals face unique challenges related to their gender identity, including gender discrimination, gender rejection, gender victimization, non-affirmation, and internalized transphobia. These challenges constitute minority stress, which is known to negatively impact mental health and life satisfaction in marginalized populations. Past research has extensively documented the adverse effects of minority stress on LGBTQ+ communities, but there is a lack of specific focus on the third gender community, which may experience distinct forms of stress and resilience. Reviewed literature indicates a necessity for exploration of the Resilience, Impulsivity and psychological stress on Third gender population.

This study aims to fill this gap by examining the interplay between minority stress (gender discrimination, gender rejection, gender victimization, non-affirmation, internalized transphobia), life satisfaction, and impulsivity within the third gender community. Moreover, the study investigates the role of resilience factors such as pride and community connectedness in mitigating the negative impacts of minority stress and promoting life satisfaction. By including impulsivity as a variable, the study explores potential coping mechanisms or behavioural manifestations in response to minority stress within the third gender community. The study's findings can contribute to a more nuanced understanding of the factors affecting the well-being of third gender individuals and inform the development of targeted interventions and support strategies to enhance their life satisfaction and resilience.

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CHAPTER THREE

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AIM OF THE STUDY

The study aims to explore the experiences of third gender individuals, focusing on the interplay between life satisfaction, impulsivity, minority stress (gender discrimination, gender rejection, gender victimization, non-affirmation, and internalized transphobia), and resilience factors (pride and community connectedness).

OBJECTIVES OF THE STUDY

- To determine the relationship between Life satisfaction and Gender Minority stress and resilience (a)Gender-related Discrimination, (b)Gender-related Rejection, (c)Gender-related Victimization, Gender Non-affirmation, Internalized Transphobia, Pride, Community Connectedness) among Third Gender community.
- To determine the relationship between Impulsivity (Attention, Motor, Non-planning) and Gender Minority stress and resilience (Gender-related Discrimination, Gender-related Rejection, Gender-related Victimization, Gender Non-affirmation, Internalized Transphobia, Pride, Community Connectedness) among Third Gender Community.
- To determine the relationship between Life Satisfaction and Impulsivity (Attention, Motor, Non-planning) among Third Gender Community.

HYPOTHESIS OF THE STUDY

There is a significant relationship between Life Satisfaction and Third gender Community, Impulsivity and Third gender Community, Minority Stress, Resilience and Third gender Community.

Based on this hypothesis, the specific hypotheses had been proposed-

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ALTERNATIVE HYPOTHESIS 1 (H_a1)

There is a significant relationship between Life satisfaction and Gender Minority stress and resilience (a)Gender-related Discrimination, (b)Gender-related Rejection, (c)Gender-related Victimization, (d)Gender Non-affirmation, (e)Internalized Transphobia, (f)Pride, (g)Community Connectedness) among Third Gender community.

NULL HYPOTHESIS 1 ($H_0$1)

There is no significant relationship between Life Satisfaction and Gender Minority stress and resilience (a)Gender-related Discrimination, (b)Gender-related Rejection, (c)Gender-related Victimization, (d)Gender Non-affirmation, (e)Internalized Transphobia, (f)Pride, (g)Community Connectedness) among Third Gender community.

ALTERNATIVE HYPOTHESIS 2 (H_a2)

There is a significant relationship between Impulsivity (a)Attention, (b)Motor, (c)Non-planning) and Gender Minority stress and resilience (a)Gender-related Discrimination, (b)Gender-related Rejection, (c)Gender-related Victimization, (d)Gender Non-affirmation, (e)Internalized Transphobia, (f)Pride, (g)Community Connectedness) among Third Gender community.

NULL HYPOTHESIS 2 ($H_0$2)

There is no significant relationship between Impulsivity ((a)Attention, (b)Motor, (c)Non-planning) and Gender Minority stress and resilience (a)Gender-related Discrimination, (b)Gender-related Rejection, (c)Gender-related Victimization, (d)Gender Non-affirmation, (e)Internalized Transphobia, (f)Pride, (g)Community Connectedness) among Third Gender community.

ALTERNATIVE HYPOTHESIS 3 (H_a3)

There is a significant relationship between Life Satisfaction and Impulsivity ((a)Attention, (b)Motor, (c)Non-planning) among Third Gender Community.

NULL HYPOTHESIS 3 ($H_0$3)

There is no significant relationship between Life Satisfaction and Impulsivity ((a)Attention, (b)Motor, (c)Non-planning) among Third Gender Community.

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RESEARCH METHODOLOGY

This research employs a quantitative approach to examine the relationship between life satisfaction, minority stress, resilience, and impulsivity within the Third gender community of West Bengal. Given the population size (n=25), this methodology will utilize robust statistical methods to analyse the data and draw meaningful conclusions.

RESEARCH DESIGN

A structured interview survey design will be utilized. This design involves purposive sampling and collecting data from a sample at a single point in time to examine associations between variables. This approach is suitable for quantifying the relationships between life satisfaction, minority stress, resilience, and impulsivity within the Third gender community.

SAMPLING METHOD

The study employed purposive sampling, a non-probability sampling technique. In purposive sampling, researchers deliberately select participants based on specific criteria or characteristics relevant to the research question.

For this study, the researchers specifically sought out and included 25 third-gender individuals to participate. Essentially, the participants are intentionally chosen because they belonged to the specific population the study aimed to investigate – third-gender individuals.

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PARTICIPANTS

The study focused on third gender individuals in West Bengal, India. The population for the research consisted of all third gender individuals in India, while the sample comprised 25 third gender individuals specifically selected to participate in the study.

- **Population:** The target population comprises Third gender individuals residing in West Bengal.
- **Sample:** Given the small population size (n=25), a census approach will be used, aiming to include all members of the population.

INCLUSION CRITERIA

Participants must:

- Self-identify as Third gender.
- Reside in West Bengal.
- Be willing and able to provide informed consent.
- Be able to communicate in a language the researcher understands (Bengali or Hindi).

EXCLUSION CRITERIA

- Individuals who are unwilling or unable to provide informed consent will be excluded from the study.
- No other gender would be selected as a participant for the study.

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DATA COLLECTION

- **Surveys:**

Standardized questionnaires will be the primary data collection method. These questionnaires will be developed based on a review of relevant literature and validated scales to measure the key variables:

- **Variables under the study and Measures:**

  - **Life Satisfaction:** The Satisfaction with Life Scale (SWLS) will be used.

    The Satisfaction with Life Scale (SWLS) is a brief, 5-item questionnaire designed to measure an individual's global cognitive judgment of their life satisfaction. Developed by Ed Diener and colleagues in 1985, it does not assess satisfaction with specific life domains like health or finances but rather provides a holistic evaluation based on the individual's own criteria and weighting of these domains.

    Respondents indicate their agreement with each of the five statements using a 7-point Likert scale, ranging from 1 (strongly disagree) to 7 (strongly agree). The five statements are: "In most ways my life is close to my ideal," "The conditions of my life are excellent," "I am satisfied with [1] my life," "So far I have gotten the important things I want in life," and "If I could live my life over, I would change almost nothing." [2] A total score is calculated by summing the responses to all five items, resulting in a possible range from 5 to 35. Higher scores indicate greater life satisfaction. A score of 20 represents a neutral point. Scores between 31-35 are typically interpreted as indicating extreme satisfaction, while scores between 5-9 suggest extreme dissatisfaction with life.

    The SWLS is a widely used and validated measure in various populations and has demonstrated good psychometric properties, including high internal consistency and temporal reliability. It is often used in research and clinical settings as a measure of overall well-being and a complement to assessments of mental health and emotional states.

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- **Minority Stress:** A tailored minority stress scale will be developed, drawing from existing measures and adapting them to the specific experiences of the Hijra community. This scale will assess experiences of discrimination, stigma, and prejudice. The Gender Minority Stress and Resilience Measure (GMSR) will be used.

- **Resilience:** The Gender Minority Stress and Resilience Measure (GMSR) will be used.

The Gender Minority Stress and Resilience (GMSR) measure is a comprehensive scale designed to assess the unique stressors faced by transgender and gender non-conforming (TGNC) individuals, as well as the resilience factors that may buffer the negative impacts of this stress. Developed by Testa and colleagues in 2015, the GMSR is grounded in Meyer's minority stress model and tailored to the specific experiences of the TGNC population. The full scale typically includes multiple subscales that tap into various aspects of stress, such as gender-related discrimination, rejection, victimization, non-affirmation of gender identity, internalized transphobia, negative expectations, and nondisclosure. Additionally, it assesses resilience through subscales like community connectedness and pride in one's gender identity. Participants usually respond to a series of statements using a Likert-type scale to indicate the frequency or intensity of their experiences related to these stress and resilience factors. The GMSR has demonstrated good psychometric properties, including reliability and validity, in various studies with TGNC adults and adolescents, making it a valuable tool for research and clinical practice aimed at understanding and addressing the mental health and well-being of gender minority individuals.

- **Impulsivity:** The Barratt Impulsiveness Scale (BIS-11) will be used.

The Barratt Impulsiveness Scale (BIS-11) is a widely used 30-item self-report questionnaire designed to assess the multifaceted construct of impulsiveness in adults. Developed by Barratt and colleagues, it measures the tendency to act without forethought. Respondents rate each item on a 4-point Likert scale ranging from 1 ("rarely/never") to 4 ("almost always/always"), reflecting the frequency of certain impulsive behaviours or preferences. The BIS-11 yields a total score, with higher scores indicating greater impulsivity. Furthermore, it comprises three second-order

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factors: attentional impulsiveness (difficulties in focusing attention), motor impulsiveness (acting without thinking), and non-planning impulsiveness (a lack of future orientation). These second-order factors are further broken down into six first-order factors: attention, cognitive instability, motor impulsiveness, perseverance, self-control, and cognitive complexity. [1] The BIS-11 is a valuable tool in both research and clinical settings for identifying and quantifying different aspects of impulsivity, which is relevant to a range of psychological conditions and behavioural patterns. While a total score provides a general index of impulsivity, the subscale scores offer a more nuanced understanding of the specific domains in which an individual exhibits impulsive tendencies.

PROCEDURE FOR COLLECTION OF DATA

The surveys will be administered in person or through a method most comfortable for the participants, ensuring privacy and confidentiality. The study employed surveys as the primary method for data collection. Participants completed standardized questionnaires designed to measure key variables. The questionnaires included the Satisfaction with Life Scale (SWLS) to assess life satisfaction, the Gender Minority Stress and Resilience Measure (GMSR) to measure minority stress and resilience, and the Barratt Impulsiveness Scale (BIS-11) to assess impulsivity. The researcher will be present to answer any questions and provide clarification. The data was collected by conducting face to face interviews with the participant in their comfortable space.

DATA ANALYSIS

- **Descriptive Statistics:**

Descriptive statistics (means, standard deviations, frequencies) will be used to summarize the characteristics of the sample and the levels of life satisfaction, minority stress, resilience, and impulsivity.

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- **Inferential Statistics:**

Given the small sample size, non-parametric tests (e.g., Spearman's rho) may be used to verify the robustness of the findings.

- **Software:**

Statistical software (SPSS) will be used to analyse the data.

RIGOR AND ETHICAL CONSIDERATIONS

- **Reliability and Validity:**

The standardized scales used in the study have established reliability and validity within the Third gender community.

- **Ethical Considerations:**

  - **Informed Consent:** Participants will be provided with detailed information about the study, including its purpose, procedures, potential risks and benefits, and their right to withdraw at any time. Written informed consent will be obtained from all participants prior to their participation.
  - **Confidentiality and Anonymity:** Participants' identities will be protected by using anonymous data collection methods. All data will be stored securely, and access will be restricted to the research team.
  - **Cultural Sensitivity:** The researcher will approach the community with cultural humility, recognizing and respecting their unique cultural norms and values. The researcher will consult with community leaders or members to ensure that the research is conducted in a culturally appropriate manner.
  - **Beneficence and Non-maleficence:** The research will aim to maximize potential benefits to the community (e.g., by contributing to a better understanding of their experiences) and minimize any potential risks of harm. The researcher will be sensitive to the potential for the research to raise difficult

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or sensitive issues for participants and will provide them with appropriate support and resources if needed.

- **Approval:** Ethical approval will be obtained from an Institutional Review Board (IRB) prior to the commencement of the study.

STATISTICAL ANALYSIS

Non-Parametric statistical analysis of the data, descriptive statistics (mean and standard deviation) and inferential statistics (Spearman's correlation rho) were adopted and computed using SPSS software. The nature of relationship between the variables was concluded with Spearman's correlation coefficient. Then the correlation was found to be significant, analysis was done at 0.05 and 0.01 levels of significance resulting in the rejection of null hypothesis. The statistical software SPSS was used for all data analysis.

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CHAPTER FOUR

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RESULT

DESCRIPTIVE STATISTICS

TABLE 1: The table below shows the mean and standard deviation of the variables.

VARIABLES	N	Mean	Std. Deviation	Kurtosis	
	Statistic	Statistic	Statistic	Statistic	Std. Error
LIFE SATISFACTION	25	19.2400	5.56986	.439	.902
GENDER DISCRIMINATION	25	4.5200	1.04563	15.338	.902
GENDER REJECTION	25	5.4000	1.29099	13.162	.902
GENDER VICTIMIZATION	25	4.0000	2.46644	-1.347	.902
NON-AFFIRMATION	25	17.2000	5.14782	4.264	.902
INTERNALIZED TRANSPHOBIA	25	21.0800	8.59224	-.081	.902
PRIDE	25	26.5600	3.37984	-1.226	.902
COMMUNITY CONNECTEDNESS	25	15.5600	2.43379	-.666	.902
ATTENTION IMPULSIVENESS	25	17.9600	5.66039	-1.345	.902
MOTOR IMPULSIVENESS	25	25.4400	10.74740	-1.362	.902
NON-PLANNING IMPULSIVENESS	25	25.1600	4.19007	-1.230	.902
Valid N (listwise)	25				

TABLE 2: The table shown above shows the bar graph for Mean and SD of the variables.

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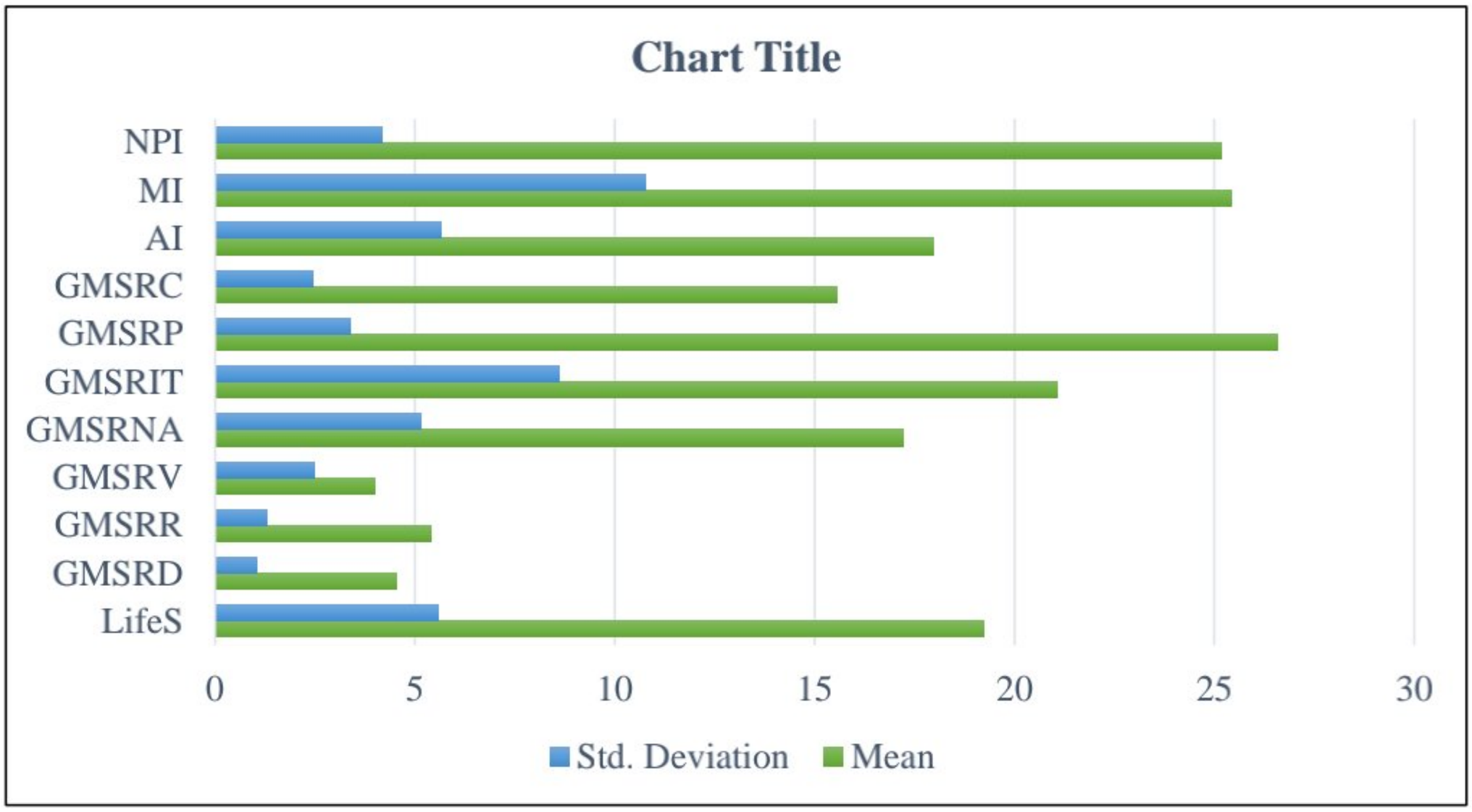
TABLE 2: The table shown below shows the bar graph for Mean and SD of the variables.



The table 1 and 2, provides a rear view of the characteristics of 25 third gender individuals included in the study. It shows the range and average levels of various factors relevant to their experiences:

Life Satisfaction: The average life satisfaction mean score was 19.24, with a standard deviation of 5.57. When we talk about the "general level of well-being" in the third gender community, we're referring to the overall state of their psychological, social, and physical health and happiness. This is a central component, referring to how individuals evaluate their own lives.

Emotional well-being involves experiencing positive emotions (joy, peace, contentment) more often than negative ones (sadness, anxiety, anger). It also includes the ability to manage stress and cope with challenges. Psychological Functioning relates to things like self-esteem, resilience, autonomy, a sense of purpose, and personal growth. This also concerns the quality of relationships, the sense of belonging to a community, and the level of social support an individual receives.

Gender-related Stressors: The table also shows the mean and standard deviation for gender discrimination (mean = 4.52), gender rejection (mean = 5.40), gender victimization (mean =

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4.00), non-affirmation (mean = 17.20), and internalized transphobia (mean = 21.08). These relatively high means suggest that the participants experienced significant challenges related to their gender identity.

Challenges arise from a lack of affirmation, meaning a lack of support and validation for their gender identity from others. "Internalized transphobia," where individuals internalize negative societal attitudes toward transgender people, also creates substantial challenges. Elevated scores in "non-affirmation" and "internalized transphobia" signify these difficulties.

Pride and Community: The mean score for pride was 26.56, indicating a generally moderate to high level of pride within the group. High pride suggests that individuals have a strong sense of self-acceptance and a positive view of their gender identity. This pride can act as a buffer against the negative effects of discrimination and societal stigma, fostering resilience.

Community connectedness had a mean of 15.56. High community connectedness implies that individuals have strong social support networks within the third gender community. These networks can provide a sense of belonging, acceptance, and understanding, which are crucial for mental and emotional well-being.

Both pride and community connectedness can serve as protective factors against the negative impacts of stress and adversity. They can enhance coping mechanisms and promote psychological well-being.

Impulsiveness: The means and standard deviations for attention impulsiveness (mean = 17.96), motor impulsiveness (mean = 25.44), and non-planning impulsiveness (mean = 25.16) provide a picture of impulsivity levels within the third gender sample. Higher motor and non-planning impulsivity could indicate ways in which individuals in the third gender community cope with stress related to discrimination, rejection, and lack of affirmation. Motor impulsivity might manifest as restlessness or agitated behaviour as a response to chronic stress. Non-planning impulsivity could reflect a focus on immediate needs or desires, potentially as a way to seek short-term relief from emotional distress.

In conclusion, higher motor and non-planning impulsivity compared to attention impulsivity in this third gender community sample may reflect the impact of stress, coping mechanisms, and the social environment. It highlights the importance of considering the different facets of impulsivity when examining mental health and well-being in this population.

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SPEARMAN's CORRELATION rho

TABLE 3: The table below shows the Spearman correlation for the variables.

			LS	GD	GR	GV	NA	IT	P	C	AI	MI	NPI
Spearman's rho	LIFE SATISFACTION	Correlation Coefficient	1.000	-.238	-.565**	-.284	-.428*	-.640**	-.287	-.611**	-.634**	-.606**	.469*
		Sig. (2-tailed)	.	.252	.003	.169	.033	.001	.164	.001	.001	.001	.018
		N	25	25	25	25	25	25	25	25	25	25	25
	GENDER DISCRIMINATION	Correlation Coefficient	-.238	1.000	.138	.269	.500*	.537**	-.029	-.309	.309	.230	-.469*
		Sig. (2-tailed)	.252	.	.512	.193	.011	.006	.891	.133	.133	.268	.018
		N	25	25	25	25	25	25	25	25	25	25	25
	GENDER REJECTION	Correlation Coefficient	-.565**	.138	1.000	.195	.623**	.817**	.157	.552**	.030	.276	-.164
		Sig. (2-tailed)	.003	.512	.	.351	.001	.000	.455	.004	.888	.181	.433
		N	25	25	25	25	25	25	25	25	25	25	25
	GENDER VICTIMIZATION	Correlation Coefficient	-.284	.269	.195	1.000	.671**	.089	-.290	.004	-.313	-.383	.308
		Sig. (2-tailed)	.169	.193	.351	.	.000	.672	.160	.986	.128	.059	.134

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		N	25	25	25	25	25	25	25	25	25	25	25
	NON-AFFIRMATION	Correlation Coefficient	-.428*	.500*	.623**	.671**	1.000	.681**	.294	.118	-.051	-.043	-.170
		Sig. (2-tailed)	.033	.011	.001	.000	.	.000	.154	.574	.809	.840	.416
		N	25	25	25	25	25	25	25	25	25	25	25
	INTERNALIZED TRANSPHOBIA	Correlation Coefficient	-.640**	.537**	.817**	.089	.681**	1.000	.413*	.311	.431*	.567**	-.543**
		Sig. (2-tailed)	.001	.006	.000	.672	.000	.	.040	.130	.031	.003	.005
		N	25	25	25	25	25	25	25	25	25	25	25
	PRIDE	Correlation Coefficient	-.287	-.029	.157	-.290	.294	.413*	1.000	.221	.523**	.439*	-.597**
		Sig. (2-tailed)	.164	.891	.455	.160	.154	.040	.	.288	.007	.028	.002
		N	25	25	25	25	25	25	25	25	25	25	25
	COMMUNITY CONNECTEDNESS	Correlation Coefficient	-.611**	-.309	.552**	.004	.118	.311	.221	1.000	.295	.419*	-.317
		Sig. (2-tailed)	.001	.133	.004	.986	.574	.130	.288	.	.152	.037	.123
		N	25	25	25	25	25	25	25	25	25	25	25
	ATTENTION IMPULSIVENESS	Correlation Coefficient	-.634**	.309	.030	-.313	-.051	.431*	.523**	.295	1.000	.847**	-.767**

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		Sig. (2-tailed)	.001	.133	.888	.128	.809	.031	.007	.152	.	.000	.000
		N	25	25	25	25	25	25	25	25	25	25	25
	MOTOR IMPULSIVENESS	Correlation Coefficient	-.606**	.230	.276	-.383	-.043	.567**	.439*	.419*	.847**	1.000	-.821**
		Sig. (2-tailed)	.001	.268	.181	.059	.840	.003	.028	.037	.000	.	.000
		N	25	25	25	25	25	25	25	25	25	25	25
	NON-PLANNING IMPULSIVENESS	Correlation Coefficient	.469*	-.469*	-.164	.308	-.170	-.543**	-.597**	-.317	-.767**	-.821**	1.000
		Sig. (2-tailed)	.018	.018	.433	.134	.416	.005	.002	.123	.000	.000	.
		N	25	25	25	25	25	25	25	25	25	25	25
**. Correlation is significant at the 0.01 level (2-tailed).													
*. Correlation is significant at the 0.05 level (2-tailed).													

TABLE 4: The below table shows the positive and negative correlation of the variables and also the level of significance.

POSITIVE CORRELATION	NEGATIVE CORRELATION
• LIFE SATISFACTION and NON-PLANNING IMPULSIVENESS (.469) * • GENDER DISCRIMINATION and NONAFFIRMATION (.500) * • GENDER DISCRIMINATION and INTERNALIZED TRANSPHOBIA (.537) **	• LIFE SATISFACTION and GENDER REJECTION (-.565) ** • LIFE SATISFACTION and NONAFFIRMATION (-.428) * • LIFE SATISFACTION and INTERNALIZED TRANSPHOBIA (-.640) **

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• GENDER REJECTION and NONAFFIRMATION (.623) ** • GENDER REJECTION and INTERNALIZED TRANSPHOBIA (.817) ** • NONAFFIRMATION and GENDER VICTIMIZATION (.671) ** • NONAFFIRMATION and INTERNALIZED TRANSPHOBIA (.681) ** • INTERNALIZED TRANSPHOBIA and PRIDE (.413) * • INTERNALIZED TRANSPHOBIA and ATTENTION IMPULSIVENESS (.431) * • INTERNALIZED TRANSPHOBIA and MOTOR IMPULSIVENESS (.567) ** • PRIDE and ATTENTION IMPULSIVENESS (.523) ** • PRIDE and MOTOR IMPULSIVENESS (.439) * • COMMUNITY CONNECTEDNESS and MOTOR IMPULSIVENESS (.419) * • ATTENTION IMPULSIVENESS and MOTOR IMPULSIVENESS (.847) **	• LIFE SATISFACTION and COMMUNITY CONNECTEDNESS (-.611) ** • LIFE SATISFACTION and ATTENTION IMPULSIVENESS (-.634) ** • LIFE SATISFACTION and MOTOR IMPULSIVENESS (-.606) ** • GENDER DISCRIMINATION and NON-PLANNING IMPULSIVENESS (-.469) * • ATTENTION IMPULSIVENESS and NON-PLANNING IMPULSIVENESS (-.767) ** • MOTOR IMPULSIVENESS and NON-PLANNING IMPULSIVENESS (-.821) ** • PRIDE and NON-PLANNING IMPULSIVENESS (-.597) **
*Correlation is significant at the 0.05 level (2-tailed).	
**Correlation is significant at the 0.01 level (2-tailed).	

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From the table 3 and 4, it can be interpreted that-

Life Satisfaction (LS) is negatively correlated with **Gender-Rejection** (GR) at **0.01 level of significance** (2-tailed), further indicates a strong and statistically reliable relationship between these two variables within the studied group. The negative correlation means that as gender rejection increases, life satisfaction tends to decrease, and vice-versa. In simpler terms, third gender individuals who experience more rejection related to their gender identity tend to report lower satisfaction with their lives. The significance level of 0.01 ($p < 0.01$) indicates that this observed relationship is highly unlikely to have occurred by chance. There is only a 1% probability of finding such a strong negative correlation if there were actually no relationship between gender rejection and life satisfaction in the third gender community. This strengthens our confidence in the finding that there is a real and meaningful connection between these two variables.

Life Satisfaction (LS) is negatively correlated with **Internalized Transphobia** (IT) at **0.01 level of significance** (2-tailed), further indicates a strong inverse relationship where higher internalized transphobia is associated with lower life satisfaction. This suggests that when third gender individuals internalize negative societal views about being transgender, it significantly diminishes their satisfaction with life. As Internalized Transphobia (IT) increases (meaning a third gender individual internalizes more negative societal attitudes about being transgender), Life Satisfaction (LS) tends to decrease (meaning they report lower satisfaction with their lives). Conversely, as Internalized Transphobia (IT) decreases (fewer internalized negative attitudes), Life Satisfaction (LS) tends to increase (higher satisfaction with life). The significance level of 0.01 ($p < 0.01$) indicates that there's only a 0.1% chance (or 0.5% chance) of observing a correlation as strong as this if there were actually no relationship between Internalized Transphobia and Life Satisfaction in the population of third gender individuals. In other words, it's very unlikely that this finding occurred due to random chance. We can be quite confident that there's a real relationship between these variables in this group.

Life Satisfaction (LS) is negatively correlated with **Community Connectedness** (CC) at **0.01 level of significance** (2-tailed), further indicates a statistically significant inverse relationship between how satisfied third gender individuals are with their lives and their sense of connection to the community. Greater community connectedness might expose individuals to the collective trauma and ongoing discrimination faced by the third gender community,

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potentially lowering individual life satisfaction. The community itself might have internal stressors or conflicts that negatively affect the well-being of its members. The negative correlation shows that as Community Connectedness increases, Life Satisfaction tends to decrease, and vice-versa. This suggests that, contrary to what might be expected, a stronger sense of connection to the community is associated with lower life satisfaction in this sample. The significance level of 0.01 ($p = 0.001$) means that this result is highly statistically significant. There's only a 0.1% chance of observing this strong negative correlation if there were no actual relationship between Community Connectedness and Life Satisfaction in the third gender community. This very low probability suggests that the finding is unlikely to be due to chance.

Life Satisfaction (LS) is negatively correlated with **Attention Impulsivity** (AI) at **0.01 level of significance** (2-tailed), further indicates a strong and statistically significant inverse relationship between life satisfaction and attention impulsivity within the studied group. The negative correlation shows that as attention impulsivity increases, life satisfaction tends to decrease. This suggests that third-gender individuals who struggle more with focus, have a shorter attention span, and are easily distracted tend to report lower satisfaction with their lives. The significance level of 0.01 ($p = 0.001$) means that this result is highly statistically significant. There's only a 0.1% chance of observing this strong negative correlation if there were no actual relationship between attention impulsivity and life satisfaction in the third gender community. This very low probability suggests that the finding is unlikely to be due to chance.

Life Satisfaction (LS) is negatively correlated with **Motor Impulsivity** (MI) at **0.01 level of significance** (2-tailed), further indicates a strong and statistically significant inverse relationship between life satisfaction and motor impulsivity within the studied group. A tendency to act impulsively may contribute to lower overall life satisfaction. This could be due to various reasons, such as difficulties in social interactions, increased risk-taking behaviours, or the negative consequences that can arise from acting without thinking. The negative correlation shows that as motor impulsivity increases, life satisfaction tends to decrease. This suggests that third-gender individuals who exhibit more impulsive behaviours like restlessness or acting without thinking tend to report lower satisfaction with their lives. The significance level of 0.01 ($p = 0.001$) means that this result is highly statistically

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significant. There's only a 0.1% chance of observing a correlation as strong as this if there were no actual relationship between motor impulsivity and life satisfaction in the third gender community. This very low probability suggests that the finding is unlikely to be due to chance.

Attention Impulsivity (AI) is negatively correlated with **Non-Planning Impulsivity** (NPI) at **0.01 level of significance** (2-tailed), further indicates a statistically significant inverse relationship between attention impulsivity and non-planning impulsivity within the studied group. This finding is interesting because it suggests a distinction between different types of impulsivities. While attention impulsivity and non-planning impulsivity are both forms of impulsive behaviour, they seem to operate somewhat independently in this group. Individuals who have difficulty focusing may not necessarily be the same individuals who act without considering the consequences. This distinction could have implications for understanding the underlying mechanisms of impulsivity and for developing targeted interventions. The negative correlation shows that as attention impulsivity increases, non-planning impulsivity tends to decrease, and vice-versa. In simpler terms, third-gender individuals who struggle more with focus and attention tend to exhibit less impulsivity related to acting without thinking ahead. The significance level of 0.01 ($p = 0.000$) means that this result is highly statistically significant. There's only a 0.1% chance of observing a correlation as strong as this if there were no actual relationship between attention impulsivity and non-planning impulsivity in the third gender community. This very low probability suggests that the finding is unlikely to be due to chance.

Motor Impulsivity (MI) is negatively correlated with **Non-Planning Impulsivity** (NPI) at **0.01 level of significance** (2-tailed), further indicates a statistically significant inverse relationship between motor impulsivity and non-planning impulsivity within the studied group. The negative correlation shows that as motor impulsivity increases, non-planning impulsivity tends to decrease, and vice-versa. In simpler terms, third-gender individuals who exhibit more impulsive behaviours like restlessness or acting without thinking tend to exhibit less impulsivity related to acting without considering the consequences. The significance level of 0.01 ($p = 0.000$) means that this result is highly statistically significant. There's only a 0.0% chance of observing a correlation as strong as this if there were no actual relationship between motor impulsivity and non-planning impulsivity in the third gender community. This very low probability suggests that the finding is highly unlikely to be due to chance. This finding, similar to the negative correlation between attention and non-planning impulsivity,

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suggests a distinction between different types of impulsive behaviours. Individuals who are prone to motor impulsivity (restlessness, acting without thinking) are less likely to be prone to non-planning impulsivity (acting without considering consequences), and vice-versa. This highlights the complexity of impulsivity and suggests that it's not a unidimensional construct. Understanding these distinctions may be important for developing targeted interventions and support strategies.

Pride (P) is negatively correlated with **Non-Planning Impulsivity** (NPI) at **0.01 level of significance** (2-tailed), further indicates a statistically significant inverse relationship between an individual's pride in their gender identity and their tendency to act without considering the consequences. The negative correlation shows that as pride increases, non-planning impulsivity tends to decrease. This suggests that third-gender individuals with a stronger sense of pride in their identity are less likely to engage in impulsive behaviours where they don't think ahead. The significance level of 0.01 ($p = .002$) means that this result is highly statistically significant. There's only a 0.2% chance of observing a correlation as strong as this if there were no actual relationship between pride and non-planning impulsivity in the third gender community. This very low probability suggests that the finding is unlikely to be due to chance. This finding suggests that pride may act as a protective factor against certain types of impulsivities. A strong sense of self and acceptance may enable individuals to pause and consider the potential consequences of their actions, reducing the likelihood of impulsive decision-making.

Life Satisfaction (LS) is negatively correlated with **Non-Affirmation** (NA) at **0.05 level of significance** (2-tailed), further indicates a statistically significant relationship where lower affirmation from others is associated with lower life satisfaction. The negative correlation shows that as non-affirmation increases, life satisfaction tends to decrease. This suggests that third-gender individuals who experience a lack of support and validation for their gender identity report lower satisfaction with their lives. The significance level of 0.05 ($p = .033$) means that this result is statistically significant and there's a 3.3% chance of observing a correlation as strong as this if there were no actual relationship between non-affirmation and life satisfaction in the third gender community. This low probability suggests that the finding is unlikely to be due to chance. This finding highlights the importance of social support and acceptance for the well-being of third-gender individuals. When individuals do not feel that their gender identity is affirmed by others, it can have a negative impact on their overall life satisfaction.

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Gender Discrimination (GD) is negatively correlated with **Non-Planning Impulsivity** (NPI) at **0.05 level of significance** (2-tailed), further indicates a statistically significant relationship where higher gender discrimination is associated with lower non-planning impulsivity. This finding suggests that experiences of discrimination might influence how individuals regulate their impulsive tendencies. It's possible that facing discrimination leads to a more cautious or deliberate approach to decision-making, perhaps as a protective mechanism. The negative correlation shows that as gender discrimination increases, non-planning impulsivity tends to decrease. This suggests that third-gender individuals who experience more discrimination are less likely to engage in impulsive behaviours where they don't think ahead. The significance level of 0.05 ($p = .018$) means that this result is statistically significant. There's a 1.8% chance of observing a correlation as strong as this if there were no actual relationship between gender discrimination and non-planning impulsivity in the third gender community.

Gender Rejection (GR) is positively correlated with **Non-Affirmation** (NA) at **0.01 level of significance** (2-tailed), further indicates a strong, statistically reliable relationship where increased gender rejection is associated with increased non-affirmation. This finding highlights the interconnectedness of negative experiences for third-gender individuals. Gender rejection and non-affirmation often go hand-in-hand, creating a reinforcing cycle of negativity. When individuals are rejected because of their gender identity, they are also less likely to receive the support and validation they need, which can have profound psychological consequences. The positive correlation shows that as gender rejection increases, non-affirmation also tends to increase. This suggests that third-gender individuals who experience more rejection related to their gender identity also report experiencing less affirmation from others. The significance level of 0.01 ($p = .001$) means that this result is highly statistically significant. There's only a 0.1% chance of observing a correlation as strong as this if there were no actual relationship between gender rejection and non-affirmation in the third gender community.

Gender Rejection (GR) is positively correlated with **Internalized Transphobia** (IT) at **0.01 level of significance** (2-tailed), further indicates a strong, statistically reliable relationship where increased gender rejection is associated with increased internalized transphobia. The positive correlation shows that as gender rejection increases, internalized transphobia also tends to increase. This suggests that third-gender individuals who experience more rejection related to their gender identity are also more likely to internalize negative societal attitudes

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toward transgender people. The significance level of 0.01 (p = .000) means that this result is highly statistically significant. There's only a 0.0% chance of observing a correlation as strong as this if there were no actual relationship between gender rejection and internalized transphobia in the third gender community. This extremely low probability suggests that the finding is highly unlikely to be due to chance. This finding highlights a particularly damaging consequence of gender rejection. When third-gender individuals are rejected by others, it can lead them to internalize negative messages about themselves, which can have severe impacts on their mental health and well-being.

Non-Affirmation (NA) is positively correlated with **Gender Victimization** (GV) at **0.01 level of significance** (2-tailed), further indicates a strong, statistically reliable relationship where increased non-affirmation is associated with increased gender victimization. The positive correlation shows that as non-affirmation increases, gender victimization also tends to increase. This suggests that third-gender individuals who experience less support and validation for their gender identity are also more likely to experience violence or harassment due to their gender identity. The significance level of 0.01 (p = .000) means that this result is highly statistically significant. There's only a 0.0% chance of observing a correlation as strong as this if there were no actual relationship between non-affirmation and gender victimization in the third gender community. This extremely low probability suggests that the finding is highly unlikely to be due to chance. This finding highlights the increased vulnerability of third-gender individuals who lack affirmation. When individuals are not supported or validated in their gender identity, it can create an environment where they are more susceptible to experiencing gender-based violence and harassment.

Non-Affirmation (NA) is positively correlated with **Internalized Transphobia** (IT) at **0.01 level of significance** (2-tailed), further indicates a strong, statistically reliable relationship where increased non-affirmation is associated with increased internalized transphobia. The positive correlation coefficient (.681) shows that as non-affirmation increases, internalized transphobia also tends to increase. This suggests that third-gender individuals who experience less support and validation for their gender identity are also more likely to internalize negative societal attitudes toward transgender people. The significance level of 0.01 (p = .000) means that this result is highly statistically significant. There's only a 0.0% chance of observing a correlation as strong as this if there were no actual relationship between non-affirmation and internalized transphobia in the third gender community. This finding highlights a crucial link between a lack of social support and the internalization of negative

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societal messages. When third-gender individuals do not receive affirmation, it can make them more vulnerable to internalizing transphobic attitudes, which can have detrimental effects on their self-esteem and mental health.

Attention Impulsivity (AI) is positively correlated with **Motor Impulsivity** (MI) at **0.01 level of significance** (2-tailed), further indicates a strong positive relationship between Attention Impulsivity and Motor Impulsivity. The positive correlation shows that as Attention Impulsivity increases, Motor Impulsivity also tends to increase. This suggests that third-gender individuals who struggle more with focus and attention are also more likely to exhibit impulsive behaviours like restlessness or acting without thinking. The significance level of 0.01 ($p = .000$) means that this result is highly statistically significant. There's only a 0.0% chance of observing a correlation as strong as this if there were no actual relationship between Attention Impulsivity and Motor Impulsivity in the third gender community. This extremely low probability suggests that the finding is highly unlikely to be due to chance. This finding suggests that attention and motor impulsivity are closely related in third-gender individuals. Those with attention difficulties are also likely to show motor impulsivity. This could imply a common underlying factor contributing to both types of impulsivities in this population.

Pride (P) is positively correlated with **Attention Impulsivity** (AI) at **0.01 level of significance** (2-tailed), further indicates that Pride is positively correlated with Attention Impulsivity. The positive correlation shows that as Pride increases, Attention Impulsivity also tends to increase. This suggests that in third gender individuals, a stronger sense of pride in their identity is associated with a greater tendency towards attention impulsivity (difficulty focusing, being easily distracted). The significance level of 0.01 ($p = .007$) means that this result is highly statistically significant. There's only a 0.7% chance of observing a correlation as strong as this if there were no actual relationship between Pride and Attention Impulsivity in the third gender community. This very low probability suggests that the finding is unlikely to be due to chance. This finding might seem counterintuitive. One might expect pride to be associated with better self-regulation. However, this result could indicate that for some third gender individuals, a stronger sense of pride might coexist with or even manifest as certain aspects of impulsivity. It's important to consider that impulsivity is complex, and pride might relate to it in nuanced ways within this community. Further research would be needed to explore this relationship in more depth.

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Life Satisfaction (LS) is positively correlated with **Non-Planning Impulsivity** (NPI) at **0.05 level of significance** (2-tailed), further indicates Life Satisfaction is positively correlated with Non-Planning Impulsivity. The positive correlation shows that as Life Satisfaction increases, Non-Planning Impulsivity also tends to increase. This suggests that in third gender individuals, a greater satisfaction with life is associated with a greater tendency towards non-planning impulsivity (acting without considering the consequences). The significance level of 0.05 ($p = .018$) means that this result is statistically significant. There's only a 1.8% chance of observing a correlation as strong as this if there were no actual relationship between Life Satisfaction and Non-Planning Impulsivity in the third gender community. This very low probability suggests that the finding is unlikely to be due to chance. This finding might seem counterintuitive. One might expect higher life satisfaction to be associated with more thoughtful behaviour. However, this result could indicate that for some third gender individuals, a higher satisfaction with life might coexist with a tendency to be more spontaneous or less focused on planning. It's important to consider that impulsivity is complex and can manifest in different ways. Further research would be needed to explore this relationship in more depth and understand the underlying factors.

Gender Discrimination (GD) is positively correlated with **Internalized Transphobia** (IT) at **0.05 level of significance** (2-tailed), further indicates that as Gender Discrimination increases, Internalized Transphobia also tends to increase. This suggests that third-gender individuals who experience more discrimination are also more likely to internalize negative societal attitudes toward transgender people. The significance level of 0.05 ($p = .011$) means that this result is statistically significant. There's only a 1.1% chance of observing a correlation as strong as this if there were no actual relationship between Gender Discrimination and Internalized Transphobia in the third gender community. This very low probability suggests that the finding is unlikely to be due to chance. This finding highlight how external experiences of discrimination can contribute to internal psychological distress. When third-gender individuals face discrimination, it can lead them to internalize negative messages about themselves, which can have detrimental effects on their self-esteem and mental health.

Gender Discrimination (GD) is positively correlated with **Non-Planning Impulsivity** (NPI) at **0.05 level of significance** (2-tailed), further indicates that as Gender Discrimination increases, Internalized Transphobia also tends to increase. This suggests that third-gender individuals who experience more discrimination are also more likely to internalize negative

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societal attitudes toward transgender people. The significance level of 0.05 (p = .011) means that this result is statistically significant. There's only a 1.1% chance of observing a correlation as strong as this if there were no actual relationship between Gender Discrimination and Internalized Transphobia in the third gender community. This very low probability suggests that the finding is unlikely to be due to chance. This finding highlight how external experiences of discrimination can contribute to internal psychological distress. When third-gender individuals face discrimination, it can lead them to internalize negative messages about themselves, which can have detrimental effects on their self-esteem and mental health.

Internalized Transphobia (IT) is positively correlated with **Pride** (P) at **0.05 level of significance** (2-tailed), further indicates that as Internalized Transphobia increases, Pride also tends to increase. This suggests that, in this sample, third-gender individuals who have higher levels of internalized negative attitudes toward transgender people also tend to have a stronger sense of pride in their identity. The significance level of 0.05 (p = .040) means that this result is statistically significant. There's only a 4.0% chance of observing a correlation as strong as this if there were no actual relationship between Internalized Transphobia and Pride in the third gender community. This finding might seem paradoxical. One might expect that higher internalized transphobia would undermine pride. However, this result could indicate complex psychological processes: Pride as a Défense Mechanism: It's possible that for some individuals, developing a strong sense of pride is a way of coping with or defending against the negative effects of internalized transphobia.; Coexisting Conflicting Attitudes: Individuals might hold both negative internalized attitudes and a sense of pride simultaneously, reflecting the complex and sometimes contradictory nature of self-perception, especially in the face of societal stigma.

Internalized Transphobia (IT) is positively correlated with **Attention Impulsivity** (AI) at **0.05 level of significance** (2-tailed), further indicates that as Internalized Transphobia increases, Attention Impulsivity also tends to increase. This suggests that third-gender individuals who have higher levels of internalized negative attitudes toward transgender people also tend to exhibit more attention impulsivity (difficulty focusing, being easily distracted). The significance level of 0.05 (p = .031) means that this result is statistically significant. There's only a 3.1% chance of observing a correlation as strong as this if there were no actual relationship between Internalized Transphobia and Attention Impulsivity in the third gender community. This finding suggests a potential link between internalized

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negative feelings and difficulties with attention and focus. Internalized transphobia might contribute to cognitive and attentional challenges in third-gender individuals.

Internalized Transphobia (IT) is positively correlated with **Motor Impulsivity** (MI) at **0.05 level of significance** (2-tailed), further indicates that as one variable increases, the other variable tends to increase as well. In this context, a [1] positive correlation between internalized transphobia and motor impulsivity suggests that individuals within the third gender community who experience higher levels of internalized transphobia are also more likely to exhibit higher levels of motor impulsivity. When a correlation is found to be statistically significant at the 0.05 level, it means that there is less than a 5% (or 1 in 20) chance that the observed positive correlation occurred purely by random chance. This provides evidence to suggest that there is a real relationship between internalized transphobia and motor impulsivity in the studied third gender community.

Pride (P) is positively correlated with **Motor Impulsivity** (MI) at **0.05 level of significance** (2-tailed), further indicates a positive correlation. This suggests that higher levels of pride within the third gender community tend to be associated with higher levels of motor impulsivity. In simpler terms, individuals who express greater pride in their identity may also be more prone to acting on immediate urges or engaging in impulsive motor behaviours. The significance level (p-value) is 0.028. This value is less than the common significance level of 0.05. Therefore, the correlation is considered statistically significant. This means there's only a 2.8% chance of observing this positive correlation if there was truly no relationship between pride and motor impulsivity in the broader third-gender community. This suggests that fostering pride may coincide with observing motor impulsivity within the community.

Community Connectedness (CC) is positively correlated with **Motor Impulsivity** (MI) at **0.05 level of significance** (2-tailed), further indicates that higher levels of community connectedness within the third gender community are associated with higher levels of motor impulsivity. In simpler terms, individuals who feel a stronger sense of belonging and connection to their community may also exhibit a greater tendency towards impulsive motor actions. The significance level (p-value) is 0.037. This value is less than the common significance level of 0.05. Therefore, the correlation is considered statistically significant. This means there's only a 3.7% chance of observing this positive correlation if there was truly no relationship between community connectedness and motor impulsivity in the broader third-gender community. The data reveals a statistically significant, moderately positive

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correlation between community connectedness and motor impulsivity within the studied third gender community. This suggests that fostering stronger community bonds may coincide with the presence of motor impulsivity within the community.

Hypothesis Summary

Null Hypothesis $\mathbf{H_0}$ Rejected (Alternative Hypothesis $\mathbf{H_1}$ Accepted)

- **Life Satisfaction and Minority Stress (H1):** The study found a statistically significant relationship between life satisfaction and several aspects of minority stress, including gender rejection, non-affirmation, and internalized transphobia. This suggests that higher levels of minority stress are associated with lower life satisfaction, leading to the rejection of the null hypotheses related to these relationships.
- **Life Satisfaction and Impulsivity (H3):** A significant correlation was observed between life satisfaction and both attention and motor impulsivity. This indicates that higher impulsivity is related to lower life satisfaction, resulting in the rejection of the corresponding null hypotheses.
- **Minority Stress and Impulsivity (H2):** The study also found a significant positive correlation between internalized transphobia and attention and motor impulsivity. Additionally, gender discrimination was negatively correlated with non-planning impulsivity. These findings led to the rejection of the null hypotheses related to these relationships.
- **Minority Stress and Resilience and Impulsivity (H2):** A significant correlation was found between pride and internalized transphobia, as well as pride and non-planning impulsivity. Also gender rejection was positively correlated with non-affirmation and non-affirmation was positively correlated with gender victimization and internalized transphobia. These results indicate a relationship between minority stress and resilience, leading to the rejection of the null hypotheses.

In summary, the study's findings provide evidence to reject several null hypotheses, demonstrating significant relationships between life satisfaction, impulsivity, minority stress, and resilience among third-gender individuals.

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CHAPTER FIVE

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DISCUSSION

The findings of this study provide valuable insights into the experiences of third gender individuals, highlighting the complex interplay between social stressors, psychological well-being, and impulsivity. Several key themes emerge from the data.

One of the most salient findings is the significant negative correlation between gender-related stressors and life satisfaction. Specifically, gender rejection, non-affirmation, and internalized transphobia were all strongly associated with lower life satisfaction. These findings are consistent with a wealth of previous research that has documented the detrimental impact of discrimination and social stigma on the mental health of transgender and gender non-conforming individuals. For instance, a meta-analysis by **Bockting et al. (2015)** found that transgender individuals experience significantly higher rates of depression, anxiety, and suicidality compared to cisgender individuals, and that these disparities are largely attributable to experiences of discrimination and victimization. Similarly, **Testa et al. (2015)** found that internalized transphobia, or the internalization of negative societal attitudes toward transgender people, is a significant predictor of psychological distress and lower life satisfaction among transgender individuals.

The study's finding that pride and community connectedness can act as protective factors against the negative effects of stress is also consistent with previous research. **McConnell et al. (2018)** found that strong social support networks and a sense of community belonging are associated with greater resilience and better mental health outcomes among transgender individuals. Similarly, **Pachankis et al. (2015)** found that pride in one's transgender identity can buffer against the negative effects of discrimination and promote psychological well-being.

The study's examination of impulsivity in third gender individuals is particularly noteworthy. The finding that higher motor and non-planning impulsivity were associated with lower life satisfaction suggests that impulsivity may be a maladaptive coping mechanism for dealing with the stress and adversity faced by this population. This is consistent with research on the link between trauma, stress, and impulsivity in other marginalized groups. For example, a study by **Nirnayak** et al. (2022) on the relationship between childhood trauma and substance use disorder among transgender women in India found that higher impulsivity was associated

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with increased substance use, potentially as a way to cope with the psychological pain of trauma. The negative correlation between attention impulsivity and non-planning impulsivity is intriguing, as it suggests that different facets of impulsivity may operate somewhat independently in this population. This finding underscores the importance of considering the multidimensional nature of impulsivity in future research.

There are a few potential limitations of this study that should be acknowledged. First, the sample size of 25 is relatively small, which limits the generalizability of the findings. Future research with larger samples is needed to confirm these results. Second, the cross-sectional nature of the study design precludes any conclusions about the direction of causality between the variables. For example, while the study found a negative correlation between gender rejection and life satisfaction, it is possible that low life satisfaction could also contribute to increased perceptions of gender rejection. Longitudinal studies are needed to disentangle the complex relationships between these variables. Finally, the study's reliance on self-report measures may be subject to social desirability bias, particularly with regard to sensitive topics such as internalized transphobia and impulsivity.

Despite these limitations, the study's findings have important implications for understanding the experiences of third gender individuals and for developing interventions to promote their well-being. The study highlights the urgent need to address the social stigma and discrimination that continue to plague this population, as well as the importance of fostering social support, community connectedness, and pride. Additionally, the study's findings on impulsivity suggest that interventions targeting impulsivity may be beneficial for improving mental health outcomes among third gender individuals.

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CONCLUSION

This study contributes to our understanding of the factors that impact the well-being of third gender individuals. It underscores the negative impact of social stressors such as gender rejection, non-affirmation, and internalized transphobia on life satisfaction, aligning with existing research on the detrimental effects of discrimination and stigma on transgender individuals. The study also highlights the potential role of impulsivity as a maladaptive coping mechanism in the face of adversity, linking it to lower life satisfaction.

However, the study also identifies protective factors that can buffer against these negative impacts. Pride in one's identity and strong community connectedness are shown to promote resilience and improve mental health outcomes, consistent with previous findings on the importance of social support and community belonging for transgender individuals.

The findings of this study have several important implications. Firstly, they emphasize the urgent need for interventions and social changes aimed at reducing stigma and discrimination against third gender individuals. This includes addressing societal attitudes, promoting acceptance, and creating more inclusive environments. Secondly, the study highlights the importance of fostering social support networks and promoting pride within the third gender community. Interventions that strengthen community bonds and empower individuals to embrace their identity can significantly improve their well-being. Finally, the study's findings on impulsivity suggest that interventions targeting impulsivity may also be beneficial for improving mental health outcomes in this population.

In summary, this study contributes to our understanding of the factors that impact the well-being of third gender individuals. It underscores the negative impact of social stressors and the potential role of impulsivity, while also highlighting the importance of protective factors like pride and community connectedness. The findings suggest a need for interventions and social changes that address stigma, promote support, and foster resilience in this population. Further research with larger, longitudinal samples is needed to build upon these findings and inform the development of effective interventions.

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LIMITATION

This study, while providing valuable insights into the experiences of third gender individuals, has several limitations that should be considered when interpreting the findings.

Firstly, the small sample size (n=25) limits the generalizability of the results to the larger third gender population. A larger sample would have provided more robust and representative data.

Secondly, the reliance on self-report measures may have introduced bias, as participants may have responded in ways they perceived as socially desirable or may have had difficulty accurately recalling their experiences.

Thirdly, a longitudinal study, which follows participants over time, would be needed to establish the directionality of these relationships.

Fourthly, the study focused on specific aspects of minority stress, resilience, and impulsivity. There may be other factors that influence the well-being of third gender individuals that were not explored in this research.

Finally, the study was conducted in a specific cultural context, and the findings may not be applicable to third gender communities in other cultural settings.

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IMPLICATION

The findings of this study have several important implications.

Firstly, they emphasize the urgent need for interventions and social changes aimed at reducing stigma and discrimination against third gender individuals. This includes addressing societal attitudes, promoting acceptance, and creating more inclusive environments.

Secondly, the study highlights the importance of fostering social support networks and promoting pride within the third gender community. Interventions that strengthen community bonds and empower individuals to embrace their identity can significantly improve their well-being.

Finally, the study's findings on impulsivity suggest that interventions targeting impulsivity may also be beneficial for improving mental health outcomes in this population.

In summary, this study contributes to our understanding of the factors that impact the well-being of third gender individuals. It underscores the negative impact of social stressors and the potential role of impulsivity, while also highlighting the importance of protective factors like pride and community connectedness. The findings suggest a need for interventions and social changes that address stigma, promote support, and foster resilience in this population. Further research with larger, longitudinal samples is needed to build upon these findings and inform the development of effective interventions.

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APPENDICES

INFORMED CONSENT FORM

Title of Study: Life Satisfaction, Impulsivity, Minority Stress and Resilience Among Third Gender Communities: A correlational study

Researcher: Saheli Das, Masters of Science in Applied Psychology (Specialization in Rehabilitation Psychology), Sister Nivedita University

Supervisor: Dr. Sweta Sah, Assistant Professor (Department of Psychology), Sister Nivedita University

Introduction:

You are being invited to participate in a research study that explores the experiences of third gender individuals. The purpose of this research is to understand the relationship between various factors, including life satisfaction, impulsivity, stress, and resilience, within the third gender community. This study aims to contribute to a better understanding of the factors that impact the well-being of third gender individuals.

Procedures:

If you agree to participate in this study, you will be asked to complete a set of questionnaires. These questionnaires will ask you about your feelings, experiences, and attitudes related to your life satisfaction, impulsivity, stress, and resilience. The questionnaires will take approximately 30-45 minutes to complete. Your participation will be entirely voluntary. You may choose not to participate or to stop participating at any time without any negative consequences.

Confidentiality:

Your responses to the questionnaires will be kept strictly confidential. Your name and any other identifying information will not be associated with your responses. All data will be stored securely, and only the researcher and their supervisor will have access to it. In any publications or presentations resulting from this study, your identity will be protected, and only aggregated data will be presented.

Risks and Benefits:

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This study involves minimal risk. You may experience some discomfort when answering questions about sensitive topics related to your experiences as a third gender individual. However, you are free to skip any questions that you do not feel comfortable answering. The potential benefits of participating in this study include contributing to a better understanding of the experiences of third gender individuals, which may help in the development of more effective support services and interventions in the future. You will also have the opportunity to express your thoughts and feelings about your own experiences.

Right to Withdraw:

Your participation in this study is voluntary. You have the right to withdraw from the study at any time without penalty. If you choose to withdraw, your data will be destroyed and will not be included in the study results.

Contact Information:

If you have any questions about this study, you may contact the researcher, Saheli Das, at [Email Address] or the supervisor, Dr. Sweta Shah, at [Email Address].

Statement of Consent:

I have read the information provided above. I have been given the opportunity to ask questions and have received satisfactory answers. I consent to participate in this research study.

Participant Name

Participant Signature

Date

Researcher Signature

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DEMOGRAPHIC INFORMATION SHEET

Title of Study: Life Satisfaction, Impulsivity, Minority Stress and Resilience Among Third Gender Communities: A correlational study

Researcher: Saheli Das, Masters of Science in Applied Psychology (Specialization in Rehabilitation Psychology), Sister Nivedita University

Supervisor: Dr. Sweta Sah, Assistant Professor (Department of Psychology), Sister Nivedita University

Please answer the following questions to help us understand the characteristics of the individuals participating in this research. Your responses will be kept confidential and will not be linked to your individual answers on the questionnaires.

1. **Age:** _____ (Years)
2. **Gender Identity:**
    - Third Gender
    - Other (Please specify): _____
3. **Location/Residence:**
    - Urban
    - Semi-Urban
    - Rural
4. **Education Level:**
    - No formal education
    - Primary education
    - Secondary education
    - Higher secondary education
    - Bachelor's degree
    - Master's degree

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- Doctorate or higher

5. **Occupation: _____**
6. **Monthly Income (INR): _____**
7. **Relationship Status:**
   - Single
   - In a relationship
   - Married
   - Divorced
   - Widowed
   - Other (Please specify):
8. **Community Affiliation:**
   - Yes
   - No
   - If yes, please specify:
9. **Have you ever experienced gender-based discrimination?**
   - Yes
   - No
10. **Have you ever experienced gender-based violence?**
    - Yes
    - No

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SATISFACTION WITH LIFE SCALE

Reference: Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The Satisfaction with Life Scale. Journal of Personality Assessment, 49, 71-75.

Description of Measure: A 5-item scale designed to measure global cognitive judgments of one's life satisfaction (not a measure of either positive or negative affect). Participants indicate how much they agree or disagree with each of the 5 items using a 7-point scale that ranges from 7 strongly agree to 1 strongly disagree.

Scale:

Instructions: Below are five statements that you may agree or disagree with. Using the 1 - 7 scale below, indicate your agreement with each item by placing the appropriate number on the line preceding that item. Please be open and honest in your responding.

- 7 - Strongly agree
- 6 - Agree
- 5 - Slightly agree
- 4 - Neither agree nor disagree
- 3 - Slightly disagree
- 2 - Disagree
- 1 - Strongly disagree

____ In most ways my life is close to my ideal.

____ The conditions of my life are excellent.

____ I am satisfied with my life.

____ So far I have gotten the important things I want in life.

____ If I could live my life over, I would change almost nothing.

Scoring: Though scoring should be kept continuous (sum up scores on each item), here are some cut offs to be used as benchmarks.

♣ 31 - 35 Extremely satisfied ♣ 26 - 30 Satisfied ♣ 21 - 25 Slightly satisfied ♣ 20 Neutral ♣ 15 - 19 Slightly dissatisfied ♣ 10 - 14 Dissatisfied ♣ 5 - 9 Extremely dissatisfied

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GENDER MINORITY STRESS AND RESILIENCE MEASURE

Instructions: Respondents are asked to indicate all applicable categories. For instance, it is possible to select both "after age 18" and "in the past year" if both circumstances are pertinent. It is important to note that, for the purpose of this survey, gender expression is defined as the manifestation of one's perceived masculinity, femininity, or androgyny, as discerned by others through various factors including, but not limited to, mannerisms, attire, and personality.

Section D: Gender-Related Discrimination

Item	Never	Yes, before age 18	Yes, after age 18	Yes, in the past year
I have experienced challenges in obtaining necessary medical or mental health treatment, whether transition-related or otherwise, due to my gender identity or expression.	O	O	O	O
Due to my gender identity or expression, I have encountered difficulties in locating appropriate public restroom facilities.	O	O	O	O
I have faced obstacles in acquiring identity documents that accurately reflect my gender identity.	O	O	O	O
I have encountered problems in securing or maintaining housing as a result of my gender identity or expression.	O	O	O	O
I have experienced challenges in obtaining or retaining employment, or have been denied professional advancement, because of my gender identity or expression.	O	O	O	O

Section R: Gender-Related Rejection

Item	Never	Yes, before age 18	Yes, after age 18	Yes, in the past year
I have encountered difficulties in establishing partnerships or have experienced the dissolution of relationships due to my gender identity or expression.	O	O	O	O
I have been rejected by or made to feel unwelcome within a religious community because of my gender identity or expression.	O	O	O	O

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I have been rejected by or made to feel unwelcome in my ethnic/racial community because of my gender identity or expression.	O	O	O	O
I have experienced rejection or distancing from friends because of my gender identity or expression.	O	O	O	O
I have experienced rejection or distancing from family because of my gender identity or expression.	O	O	O	O
I have been subjected to verbal harassment or teasing because of my gender identity or expression (e.g., being referred to as "it").	O	O	O	O
I have been threatened with involuntary disclosure of my gender identity or blackmail because of my gender identity or expression.	O	O	O	O
I have had my personal property damaged because of my gender identity or expression.	O	O	O	O
I have been threatened with physical harm because of my gender identity or expression.	O	O	O	O
I have been subjected to physical assault, including pushing, shoving, hitting, or having objects thrown at me, because of my gender identity or expression.	O	O	O	O
I have been subjected to non-consensual sexual contact because of my gender identity or expression.	O	O	O	O
I have been exposed to negative statements concerning transgender or gender nonconforming individuals.	O	O	O	O

Non-Affirmation (NA)

Please indicate the extent to which you concur with the following statements.

Item	**Strongly Disagree**	**Somewhat Disagree**	**Neither Agree/Disagree**	**Somewhat Agree**	**Strongly Agree**
I find it necessary to repeatedly elucidate my gender identity to others or correct their use of pronouns.	O	O	O	O	O
I experience difficulty in being perceived as my correct gender.	O	O	O	O	O

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I must exert considerable effort for others to accurately recognize my gender.	O	O	O	O	O
I am compelled to adopt an exaggerated masculine or feminine persona in order for my gender to be accepted.	O	O	O	O	O
My gender identity is not respected by others due to my appearance or physical form.	O	O	O	O	O
I believe that others fail to comprehend me because their perception of my gender differs from my own.	O	O	O	O	O

Internalized Transphobia (IT)

Item	**Strongly Disagree**	**Somewhat Disagree**	**Neither Agree/Disagree**	**Somewhat Agree**	**Strongly Agree**
I harbor resentment towards my gender identity or expression.	O	O	O	O	O
My gender identity or expression evokes feelings of abnormality.	O	O	O	O	O
I experience depression when contemplating my gender identity or expression.	O	O	O	O	O
I feel unhappy when reflecting on my gender identity or expression.	O	O	O	O	O
My gender identity or expression leads me to feel like an outcast.	O	O	O	O	O
I frequently question the atypical nature of my gender identity or expression.	O	O	O	O	O
I perceive my gender identity or expression as a source of embarrassment.	O	O	O	O	O

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I experience envy towards individuals whose gender identity or expression aligns with societal norms.	O	O	O	O	O

Pride (P)

Item	Strongly Disagree	Somewhat Disagree	Neither Agree/Disagree	Somewhat Agree	Strongly Agree
My gender identity or expression engenders a sense of distinction and uniqueness.	O	O	O	O	O
I am comfortable with others being aware that my gender identity differs from my sex assigned at birth.	O	O	O	O	O
I experience no difficulty in discussing my gender identity and gender history with most individuals.	O	O	O	O	O
I consider my gender identity, which diverges from my sex assigned at birth, to be a positive attribute.	O	O	O	O	O
While I share similarities with others, my gender identity, which differs from my sex assigned at birth, also makes me unique.	O	O	O	O	O
I take pride in being a person whose gender identity is different from their sex assigned at birth.	O	O	O	O	O
I am at ease disclosing to others that my gender identity is different from my sex assigned at birth.	O	O	O	O	O
I prefer that others possess complete knowledge of and acceptance towards my gender identity and gender history.	O	O	O	O	O

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Section C: Community Connectedness

Item	Strongly Disagree	Somewhat Disagree	Neither Agree/Disagree	Somewhat Agree	Strongly Agree
I perceive myself as an integral member of a community comprising individuals who share my gender identity.	O	O	O	O	O
I feel a sense of connection with other individuals who share my gender identity.	O	O	O	O	O
I experience a sense of belonging when interacting with members of the community that shares my gender identity.	O	O	O	O	O
I do not consider myself similar to others who share my gender identity.	O	O	O	O	O
I experience feelings of isolation and separation from other individuals who share my gender identity.	O	O	O	O	O

Information for Clinicians and Researchers:

The Gender Minority Stress and Resilience (GMSR) Measure was developed to assess aspects of minority stress and resilience experienced by individuals whose gender identity or expression diverges in any respect from that socially expected based on their sex assigned at birth. The scale encompasses the following constructs:

- **D: Gender-related discrimination.** This measure was created by combining (a) themes identified from a previously conducted focus group of transgender adults focusing on minority stress with (b) items created based on other prevalent forms of discrimination described by transgender and gender nonconforming (TGNC) respondents in large-scale national studies of TGNC individuals' experiences. For scoring purposes, responses are coded as 1 if "Yes" at any point, and 0 if "Never."
- **R: Gender-related rejection.** This measure was created by combining (a) themes identified from a previously conducted focus group of transgender adults focusing on minority stress with (b) items created based on other prevalent forms of rejection identified by transgender respondents in national studies of TGNC individuals' experiences. For scoring purposes, responses are coded as 1 if "Yes" at any point, and 0 if "Never."

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- **V:** For research purposes, the last item (7) is not included in scoring, but has been retained for clinical purposes.
- **NA: Non-Affirmation.** This scale was created based on prevalent experiences reported by TGNC individuals in national surveys related to gender identity non-affirmation in various settings. For scoring purposes, response options are coded as follows: (0) Strongly Disagree, (1) Somewhat Disagree, (2) Neither Agree/Disagree, (3) Somewhat Agree, and (4) Strongly Agree.
- **IT: Internalized transphobia.** Internalized transphobia was evaluated with the 8-item Shame subscale from the Transgender Identity Survey (TGIS). This scale has demonstrated internal reliability, with a Cronbach's alpha of .89. Response options were adjusted from a 7-point to a 5-point Likert-type scale ranging from "strongly disagree" to "strongly agree." For scoring purposes, response options are coded as follows: (0) Strongly Disagree, (1) Somewhat Disagree, (2) Neither Agree/Disagree, (3) Somewhat Agree, and (4) Strongly Agree.
- **P: Pride.** Pride regarding TGNC identity was measured by the Pride subscale of the Transgender Identity Scale. Reliability has been established with an alpha of .88. Response options were adjusted from a 7-point to a 5-point Likert-type scale ranging from "strongly disagree" to "strongly agree." For scoring purposes, response options are coded as follows: (0) Strongly Disagree, (1) Somewhat Disagree, (2) Neither Agree/Disagree, (3) Somewhat Agree, and (4) Strongly Agree.
- **NE: Negative Expectations** for future events. For this scale, items were adapted from a measure of negative expectations for rejection among individuals identifying as lesbian, gay, or bisexual. Several items were also added to reflect unique concerns identified in a focus group and national surveys with TGNC individuals. For scoring purposes, response options are coded as follows: (0) Strongly Disagree, (1) Somewhat Disagree, (2) Neither Agree/Disagree, (3) Somewhat Agree, and (4) Strongly Agree.
- **ND: Non-Disclosure.** Items were developed to reflect means of non-disclosure utilized by TGNC individuals, as identified in a national survey of TGNC individuals, and autobiographical material of TGNC writers. For scoring purposes, response options are coded as follows: (0) Strongly Disagree, (1) Somewhat Disagree, (2) Neither Agree/Disagree, (3) Somewhat Agree, and (4) Strongly Agree.
- **CC: Community Connectedness.** This scale was created utilizing both (a) themes from a previously conducted focus group of transgender adults focusing on minority stress and (b) items from the Alienation subscale of the Transgender Identity Survey (TGIS). Items from the latter were modified to primarily reflect affiliation instead of isolation. For scoring purposes, the response options are coded as follows: (0) Strongly Disagree, (1) Somewhat Disagree, (2) Neither Agree/Disagree, (3) Somewhat Agree, and (4) Strongly Agree, with the exception of the last two items, which are reverse scored.
- *Both NE and ND constructs are measured with slightly different wording depending on whether individuals do or do not live in their affirmed gender all or most of the time. (Affirmed gender denotes that which the individual perceives as accurate for themselves.)

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BARRATT IMPULSIVENESS SCALE (BIS-11)

The Barratt Impulsiveness Scale (BIS-11) is a 30-item self-report questionnaire used to assess impulsivity in research and clinical settings.

Directions:

People have different ways of acting and thinking in various situations. This questionnaire measures some of the ways you act and think. For each statement, select the option that best describes how you generally act or think. Please answer each question quickly and honestly.

Response Options:

- Rarely/Never
- Occasionally
- Often
- Almost Always/Always

Items:

1. I plan tasks carefully.
2. I do things without thinking.
3. I make up my mind quickly.
4. I am happy-go-lucky.
5. I don't "pay attention."
6. I have "racing" thoughts.
7. I plan trips well ahead of time.
8. I am self-controlled.
9. I concentrate easily.
10. I save regularly.
11. I "squirm" at plays or lectures.
12. I am a careful thinker.
13. I plan for job security.
14. I say things without thinking.
15. I like to think about complex problems.
16. I change jobs.

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17. I act "on impulse."

18. I get easily bored when solving thought problems.

19. I act on the spur of the moment.

20. I am a steady thinker.

21. I change residences.

22. I buy things on impulse.

23. I can only think about one thing at a time.

24. I change hobbies.

25. I spend or charge more than I earn.

26. I often have extraneous thoughts when thinking.

27. I am more interested in the present than the future.

28. I am restless at the theatre or lectures.

29. I like puzzles.

30. I am future-oriented.

BIS-11 Scoring and Interpretation

The BIS-11 assesses impulsivity across six first-order factors and three second-order factors. A total score can be calculated by summing the relevant first- or second-order factor scores. Items are scored on a four-point scale:

- Rarely/Never = 1
- Occasionally = 2
- Often = 3
- Almost Always/Always = 4

Some items are reverse-scored. If you have any questions concerning the BIS-11, please contact Matthew S. Stanford, Ph.D., Department of Psychology & Neuroscience, Baylor University.

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